

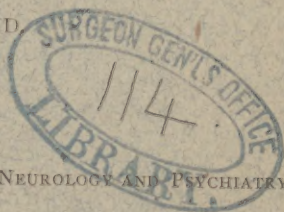
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THE
RATIONAL TREATMENT
OF
CHOREA,

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JOHN VAN BIBBER, M.D.,

BALTIMORE, MD



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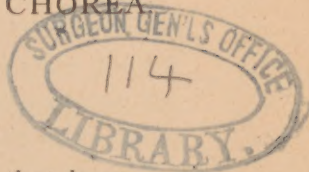
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THE RATIONAL TREATMENT OF CHOREA

BY

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Baltimore, Md.



THE latest articles and studies on chorea that have appeared in the current medical journals do not, in any way, refer to a most important factor in the treatment of this disease.

In the light of an extended experience in the management of chorea, this general omission seems very singular, and I have determined again at this time to refer to the results of my study of this peculiar nervous affection. I say again, for in a paper read before the Medical and Chirurgical Faculty of Maryland in 1878, and printed in the Transactions of that year, I suggested a treatment for chorea which, though it had been proposed before, had made little or no impression on the profession, and, it must be added, the effort seems to have passed unnoticed, or has been entirely forgotten, for the treatment does not prove to have invited either praise or opposition, no place being given to it in the many suggestions made since then, in the journals, for the treatment and cure of St. Vitus' dance. Within the past year chorea has been remarkably prevalent in Baltimore, and though I will not go so far as to say it has been epidemic, or could be so, still I am astonished at the number of cases brought to my notice. In private and dispensary practice I have seen not less than eighty-six (86) cases of this disease during the last year, and both in abridging the duration of an attack, and mak-

ing the cure more permanent, my success has been so encouraging that I am led to believe that this effort should be made to introduce a valuable method of treatment into general notice.

Most of these cases were of a well-marked and severe type, and many of them had proved obstinate under other medical treatment, and while the long list of remedies usually used in chorea had been uselessly exhausted, the patients remained as hopelessly jerky and restless as they were when they commenced to test the whole gamut of a therapeutic treatment. It must not be inferred from this assertion that the plan to be suggested is efficient without the use of drugs, or will be recommended as curative without their aid. This is far from the purpose of this article, the chief aim of which is to call attention to the fact that chorea cannot be treated by drugs alone, and that the best results can only be obtained by a combination of medical regimen and proper physical care. But this last element requires much careful attention on the part of the physician, and much tedious monotony on the part of those who nurse the patient, and hence the prospect of popularity for this recommendation is dim and uncertain. Yet it nevertheless deserves serious consideration, for in my hands it has proved in many obstinate cases the best and most reliable means of bringing about recovery.

To select an example of the information which can be obtained from various authors in regard to the treatment of St. Vitus' dance, I will refer to Reynolds' System of Medicine. I find the chapter on chorea is full and interesting. It contains a graphic description of the disease, diagnosis, and pathology. In regard to treatment it contains the usual long list of remedies of more or less value, devotes much space to advocating the beneficial effects of exercise and regulated movements, and even goes so far as to recommend dancing. A single paragraph of a few

lines refers to the fact that in bad cases the "recumbent position" is a necessary part of treatment.

Now, this is in my experience the most important factor in the management of all cases of chorea. In the article just referred to, Dr. Radcliffe dwells at length upon the fact that exercise, gymnastics, and regulated movements are most beneficial in this disease, while on the other hand, my success in the rest treatment leads me to be equally positive in my belief that the most rational, efficient, and proper treatment for all cases of chorea is rest. It will be hard to reconcile views so utterly at variance with each other, and I feel tempted to strengthen my opinion with some corroborative testimony. In a report of the service at the Evelina Hospital (*Lancet*, February 10th, 1883), Dr. Goodhart relates a case of chorea major which was treated alone by rest and massage, and though he questions the cure by an interrogation, I look upon the success as an evidence of my theory. The following is an abstract of the report: E. L., girl, twelve years. Admitted September 19th. Seven weeks ago it was noticed that her arms were constantly twitching and she was unable to be quiet. Was seen by two medical men, but in spite of treatment grew rapidly worse. Patient was so bad when admitted that the sides of the bed were padded in order to keep her from injury. Was ordered to bed and to be kept as quiet as possible; only one attendant was allowed to be with her. Full diet and massage for twenty minutes twice daily. October 7th; had improved much. October 14th; could talk better and feed herself. October 26th; was well enough to be discharged.

In some remarks on this case, Dr. G. says: "Thirty-four days after admission patient was quite well. May this be said to be due to massage, to rest in bed, or to isolation from friends and relatives, or to all three combined? She never had any medicine." Personally, this question

is, I think, very easily answered by my own experience of the past year with the rest treatment, and I select from my note-book several cases which will indicate the value of rest and massage as curative agents in this special class of nervous disease.

E. W., age fourteen, well developed, no rheumatic history. Had been under medical treatment for nine weeks when I first saw her. Had been advised to go out as much as possible, to take violent exercise, etc., etc. Worse now than at any time during sickness. After walking, or any exercise or excitement, is always more restless. Persistent insomnia. Saw this patient on December 28th, 1883. Ordered her at once to bed, to be kept as quiet as possible, and free from all excitement, to see no strangers, and to have only one person in room with her. Massage three times daily, and whenever very restless; diet liberal.

December 30th. Decided improvement; restlessness much reduced, talks more distinctly; same treatment continued with addition of tonic before eating. Sol. Fowleri, gtt. xv., and Succi conii 3 iij. daily.

January 4th. Much improved; sleeps well and appetite very good.

January 14th. Patient is now allowed to sit up for a few hours daily, and on January 21st is allowed to take a short walk and pronounced cured.

H. G., boy, eleven years, was brought to office February 1st, with well-marked case of chorea. Has been under treatment for six weeks. The doctor ordered him to be out in the air all day, to walk far and play hard. The boy himself objected, but this was not allowed, and his mother forced him out each day. Under this treatment he has been gradually getting worse. Ordered patient to bed immediately on return home. To be kept free from all excitement, no children to be allowed in the room, slow and gentle massage three times daily. Treatment same as

last case, with addition of $\frac{3}{4}$ ss. Sp. frumenti each P.M. In three days the improvement was marked, and on February 9th was almost free from facial grimaces; can talk much better, and muscles of arm and leg are quieter in every way. Patient does not object to bed, feels so much more comfortable that he is willing to stay in one room a month if it is necessary.

February 25th. Report good, and so much improved that he is allowed to sit up, and on 28th goes out, cured.

N. H., girl, thirteen. Had been quite sick with intermittent fever, and during convalescence was noticed to be irritable and restless. In ten days well-marked chorea was developed, and I saw her October 8th, about two weeks after the commencement of attack. Movements of extremities were unceasing, and sleep was much disturbed. Ordered same treatment as in preceding cases, with addition of quiniæ sulph. and substitution tinct. cinchona flav. for ordinary tonic. Massage has very soothing effect upon this patient, and she asks to be manipulated all the time.

October 12th. Has much improved, but on 13th had a chill, after which she became worse. Up to 23d patient had several bad days, clearly owing to the malarial complication; and after this date she steadily improved, and was allowed to go out on November 5th.

These are cases in private practice where any special directions in regard to care and nursing can be faithfully carried out, and in which one would naturally expect better results than in dispensary cases. But although among the poorer classes the element of quiet in conjunction with rest is almost impossible, still I have found this treatment, even when modified by circumstances, to be of great value. Patients that have resisted all forms of treatment finally succumbed to power of rest and massage. Of the fifty-three (53) cases seen at dispensary for nervous diseases during the last year, all of them were placed under this

treatment, and though this number includes many severe cases of chorea major, the success has always been encouraging.

The limits of this article prevent me from giving further details of cases, and I will now come to the discussion of the plan of treatment which has been advocated.

If exercise and regulated movements are found to give the best results on the physical side of the treatment for St. Vitus' dance, we should be loyal to this rule, for the care of the patient is less irksome, and the responsibility in the case is reduced to a minimum.

But, on the other hand, if by experience, if by the encouragement of good results, we find that rest curtails the disease, renders recovery more permanent, and makes the patient much more comfortable during the attack, I think the views so long entertained by the majority of the profession should be modified, if not absolutely changed. Now, it has been my experience that to place a choreic child in the best possible condition, to secure rest and quiet, to insure an avoidance of all external irritation, and to invite sleep whenever that sedative influence can be brought about, is a matter of the utmost importance, and the greatest possible aid to the action of various remedies.

It is impossible to expect sedatives, except in injurious doses, to quiet the constant turmoil of the body which always exists in bad cases of chorea, and which is always increased by exercise or excitement of any kind. For each movement or effort brings on a succession of irregular and exaggerated muscular twitchings, and these so irritate and exhaust the patient, that a state bordering upon frenzy is brought about. The effort to reduce this frenzy to a minimum, and by quiet and absence of excitement to induce repose, is certainly a rational one, and I have often found that those who are in charge of choreic

children agree with me that walking or exercise of any kind invariably makes them worse.

It seems difficult to believe that regulated movements or calisthenics could have been recommended as a means of cure for a disease which clearly demands rest and quiet as the two essential points to be sought for and obtained. In a patient suffering from chorea, any voluntary movement excites and brings on a series of exaggerated motions, both in the muscles directly concerned in the action and in other parts of the body. Thus, forced exercise in such cases must be a species of torture, and the sum of unnecessary and irregular movements amounts to a general condition of clonic spasm which, I am quite sure, must needlessly prolong the duration of the attack. Indeed, I sincerely hope that the semi-homœopathic system of movements curing movements will be now entirely abandoned; for whatever may be our idea of the pathology of chorea, the fact still remains that there exists a certain irritability of the nerve centres which produces the most prominent symptom of the disease. To reduce this irritability is the first indication of a wise treatment, and I cannot see how this is to be accomplished by excitement or violent exercise. Entire freedom from all external distractions and prolonged rest in bed are the best means of reducing this irritability, and these soothing influences make the patient less difficult to manage, and more amenable to treatment.

I have purposely omitted until the end of this article to give in detail the method adopted by me in the management of St. Vitus' dance, for I am anxious to place it before the profession with as much emphasis as possible, and I know that often the last part of an article is read when the rest of it may be neglected. An effort must be made to induce others to give the rest treatment a fair and impartial trial, and I am sure one case treated after

the following method will convert the most ardent champion of the exercise or gymnastic treatment from a grave and cruel error.

As the factor of the first importance in this method of treatment is rest, the patient should be confined to bed in a quiet and moderately-lighted room, and this seclusion must be so guarded that it cannot be disturbed, and so supplemented that it cannot produce weakness.

Massage by slow and gentle gradations will gradually give the patient ample passive exercise, and this should be rigidly carried out at least three times each day. Any momentary excitement can be lulled by these manipulations, and the attendant will soon learn that this is the *best means* of controlling the restlessness which always makes its appearance in the afternoon. When sleep does not come naturally to the patient, some means to produce it will be employed, but not until the slowly repeated massage has been given a fair and thorough trial. This amount of passive exercise will improve the appetite, and thus it will be possible to give nourishment frequently and in ample quantity; and if the manipulations are carried out with care and assiduity, the torpor of the bowels is prevented, and no ill effects can result from a prolonged confinement in bed. It will be found best to have the patient in charge of one attendant, whose duty it will be to prevent all unnecessary conversation, and to protect the patient from all causes of excitement, and who will carry out each detail of the treatment with honesty and precision.

As an aid, therefore, to any medical treatment, this system of rest is invaluable, for it places the patient in the best possible condition to be affected by drugs, and being as quiet as the circumstances will allow, the element of habit, which is by no means to be forgotten, is rendered every day less powerful.

